



**Missouri Department of Natural Resources**  
**MISSOURI PROJECT WET**  
**WORKSHOP PROPOSAL**

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Work phone\_\_\_\_\_ Home phone\_\_\_\_\_

Date(s) of proposed workshop\_\_\_\_\_

Times\_\_\_\_\_ Location\_\_\_\_\_

Facilitators\_\_\_\_\_

Audience represented\_\_\_\_\_

Estimated number of participants\_\_\_\_\_

Number of guides needed\_\_\_\_\_ **Call Coordinator (two weeks prior to your workshop)**  
**to confirm the number of guides.** This will ensure timely delivery of your guides.

Proposed workshop agenda (Use the back of this page or attach another page.)

Return form to: **Missouri Department of Natural Resources**  
**Missouri Project WET**  
**Outreach and Assistance Center**  
**P.O. Box 176**  
**Jefferson City, MO 65102**  
**(573) 751-3131 or**  
**(800) 361-4827**

**E-Mail: [nrpittj@mail.dnr.state.mo.us](mailto:nrpittj@mail.dnr.state.mo.us)**

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